



June 15, 2022

BULLETIN NO. 09-2022

TO:

HEALTH INSURERS, HEALTH MAINTENANCE ORGANIZATIONS, HOSPITAL

PUBLIC SERVICE CORPORTATIONS, HEALTHCARE PAYORS, AND OTHER

INTERESTED PARTIES

FROM:

ARKANSAS INSURANCE DEPARTMENT

SUBJECT:

ACT 965 REPORTS "AN ACT TO ESTABLISH THE ARKANSAS FAIRNESS IN

COST SHARING ACT"

Pursuant to Act 965 of 2021, "An Act To Establish The Arkansas Fairness in Cost Sharing Act," now codified at Ark. Code Ann. §§ 23-79-2301 et seq., and § 23-92-511, health insurers and health maintenance organizations in the fully insured market are required to submit a report to the Commissioner describing "plan-specific information related to savings and accountability to document how enrollees are realizing a cost savings under each plan."

The Commissioner interprets this Act to require a written report from health insurers describing the savings derived from the receipt of pharmaceutical manufacturer rebates by the health benefit plans and how these rebates are applied to reduce "cost-sharing requirements" for consumers who are enrolled in health benefit plans with prescription drug benefits. The Act defines "cost-sharing requirement" to mean a copayment, coinsurance, deductible, or annual limitation subject to the Patient Protection and Affordable Care Act that is required by or on behalf of an enrollee in order to receive a specific healthcare service, including a prescription drug, covered by a health benefit plan.

Health insurers and health maintenance organizations subject to the Act shall file a written report with the Commissioner on or before January 1st of each year discussing how, or the extent to which, manufacturer rebates were received and used to help reduce "cost-sharing requirements" for enrollees of health benefit plans. The format of the written report may be in narrative form.

Please direct any inquires to Legal Division via telephone 501-371-2820 or email

insurance.legal@arkansas.gov.

ALAN McCLAIN

INSURANCE COMMISSIONER

STATE OF ARKANSAS

DATE 6/15/2022